



OMBC POLICY ALERT

DATE: January 3, 2019

TO: Osteopathic Physicians and Surgeons

FROM: Angie Burton, Executive Director

SUBJECT: AB 2760 Naloxone Hydrochloride Access and Other FDA-approved Drugs

Summary: AB 2760 signed into law by Governor Brown, effective January 1, 2019 creates Article 10.7 Opioid Medication of the Business and Professions Code. This bill requires a health care practitioner authorized to prescribe controlled substances (prescriber) to offer a prescription for naloxone hydrochloride (naloxone) or another FDA-approved drug for the complete or partial reversal of opioid depression, under specified conditions. This bill also requires a prescriber to provide education to a patient (or the patient's parent/guardian or designee) on overdose prevention and the use of naloxone or other similar FDA-approved drugs.

Background: The legislative intent of this bill is to combat the opioid crisis in California. The Legislature finds and declares that *abuse and misuse of opioids is a serious problem that affects the health, social, and economic welfare of the state. After alcohol, prescription drugs are the most commonly abused substances by Americans over 12 years of age. Deaths involving prescription opioid pain relievers represent the largest proportion of drug overdose deaths, greater than the number of overdose deaths involving heroin or cocaine. Driven by the surge in drug deaths, life expectancy in the United States dropped for the second year in a row in 2016, resulting in the first consecutive decline in national life expectancy since 1963. Should 2017 also result in a decline in life expectancy as a result of drug deaths, it would be the first three-year period of consecutive life expectancy declines since World War I and the Spanish flu pandemic in 1918.*

Policy Implications: This bill seeks to increase access to naloxone hydrochloride and other FDA approved prescription drugs. If patients fit the specified patient criteria, then prescribers are required to offer the patient a prescription for naloxone or similar FDA-approved drug. Prescribers are also required to educate these patients about the risks of taking these drugs including risks for overdose. If physicians and surgeons are found to have not complied with

this new mandate, they may be subject to discipline by the Osteopathic Medical Board of California.

Text of Business and Professions Code sections 740, 741 and 742:

740.

For purposes of this article, "prescriber" means a person licensed, certified, registered, or otherwise subject to regulation pursuant to this division, or an initiative act referred to in this division, who is authorized to prescribe prescription drugs.

741.

(a) Notwithstanding any other law, a prescriber shall do the following:

(1) Offer a prescription for naloxone hydrochloride or another drug approved by the United States Food and Drug Administration for the complete or partial reversal of opioid depression to a patient when one or more of the following conditions are present:

(A) The prescription dosage for the patient is 90 or more morphine milligram equivalents of an opioid medication per day.

(B) An opioid medication is prescribed concurrently with a prescription for benzodiazepine.

(C) The patient presents with an increased risk for overdose, including a patient with a history of overdose, a patient with a history of substance use disorder, or a patient at risk for returning to a high dose of opioid medication to which the patient is no longer tolerant.

(2) Consistent with the existing standard of care, provide education to patients receiving a prescription under paragraph (1) on overdose prevention and the use of naloxone hydrochloride or another drug approved by the United States Food and Drug Administration for the complete or partial reversal of opioid depression.

(3) Consistent with the existing standard of care, provide education on overdose prevention and the use of naloxone hydrochloride or another drug approved by the United States Food and Drug Administration for the complete or partial reversal of opioid depression to one or more persons designated by the patient, or, for a patient who is a minor, to the minor's parent or guardian.

(b) This section does not apply to a prescriber when prescribing to an inmate or a youth under the jurisdiction of the Department of Corrections and Rehabilitation or the Division of Juvenile Justice within the Department of Corrections and Rehabilitation.

742.

A prescriber who fails to offer a prescription, as required by paragraph (1) of subdivision (a) of Section 741, or fails to provide the education and use information required by paragraphs (2) and (3) of subdivision (a) of Section 741 shall be referred to the appropriate licensing board solely for the imposition of administrative sanctions deemed appropriate by that board. This section does not create a private right of action against a prescriber and does not limit a prescriber's liability for the negligent failure to diagnose or treat a patient.